

SECRET  
(When Filled In)

Approved For Release 2003/03/10 : CIA-RDP78-05343A000200010009-6

17 May 1974

|                                     |  |   |  |
|-------------------------------------|--|---|--|
| 1. SERIAL NUMBER                    |  | 2. NAME (Last-First-Middle)   |  |
|                                     |  | 25X1A   |  |
| 3. NATURE OF PERSONNEL ACTION       |  | 4. EFFECTIVE DATE REQUESTED   |  |
| Change of Service Designation       |  | MONTH DAY YEAR<br>ASAP  |  |
| 5. CATEGORY OF EMPLOYMENT           |  | 6. FUNDS  |  |
| Special Scientific                  |  | X V TO V<br>CF TO V   |  |
| 7. FAN AND NSCA                     |  | 8. LEGAL AUTHORITY (Completed by Office of Personnel)               |  |
| 42640004 0000                       |  |   |  |
| 9. ORGANIZATIONAL DESIGNATIONS      |  | 10. LOCATION OF OFFICIAL STATION                                    |  |
| DDS&T/OSI<br>Development Complement |  | Wash., D.C.   |  |
| 11. POSITION TITLE                  |  | 12. POSITION NUMBER   |  |
| Med Of Psych                        |  | 9997  |  |
| 13. CAREER SERVICE DESIGNATION      |  | 14. CLASSIFICATION SCHEDULE (GS, LB, etc.)                          |  |
| R                                   |  | SPS   |  |
| 15. OCCUPATIONAL SERIES             |  | 16. GRADE AND STEP  |  |
| 0602.03                             |  | 004   |  |
| 17. SALARY OR RATE                  |  | 18. REMARKS   |  |
| \$ 36,000                           |  | I hereby agree to change my career service designation from M to R. |  |

25X1A

CONCUR:

/s/ John F. Blake

25 OCT 1974

25X1A

DDT

|  |  |             |  |
|--|--|-------------|--|
| 18. SIGNATURE OF CAREER SERVICE APPROVING OFFICER  |  | DATE SIGNED |  |
| [Signature]  |  | 5/21/74     |  |
| 188. SIGNATURE OF CAREER SERVICE APPROVING OFFICER |  | DATE SIGNED |  |
| [Signature]  |  | DDS&T       |  |

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

|   |                       |                                     |                          |  |                                |                   |                   |                 |
|---|-----------------------|-------------------------------------|--------------------------|--|--------------------------------|-------------------|-------------------|-----------------|
| 19. ACTION CODE   | 20. EMPLOY. CODE      | 21. OFFICE CODING                   | 22. STATION CODE         | 23. INTEGREE CODE  | 24. HQTRS. CODE                | 25. DATE OF BIRTH | 26. DATE OF GRADE | 27. DATE OF LEI |
|   |                       | NUMERIC ALPHABETIC                  |                          |  |                                | MO. DA. YR.       | MO. DA. YR.       | MO. DA. YR.     |
| 28. NTE EXPIRES   | 29. SPECIAL REFERENCE | 30. RETIREMENT DATA                 | 31. SEPARATION DATA CODE | 32. CORRECTION/CANCELLATION DATA                         | 33. SECURITY REQ. NO.          | 34. SEX           |                   |                 |
| MO. DA. YR.   |                       | 1-CSC<br>2-DRGN<br>3-FICA<br>3-NONE | CODE                     | TYPE MO. DA. YR.   |                                |                   |                   |                 |
| 35. VET. PREFERENCE   | 36. SERV. COMP. DATE  | 37. LONG. COMP. DATE                | 38. CAREER CATEGORY      | 39. FEGLI/HEALTH INSURANCE                               | 40. SOCIAL SECURITY NO.        |                   |                   |                 |
| CODE 0-NONE<br>1-5 PT.<br>2-10 PT.  | MO. DA. YR.           | MO. DA. YR.                         | CAR/RESV<br>PROV/TEMP    | CODE CODE 0-WAIVER<br>1-REG<br>2-REG/OPT<br>3-INELIGIBLE | HEALTH INS. CODE               |                   |                   |                 |
| 41. PREVIOUS CIVILIAN GOVERNMENT SERVICE  | 42. LEAVE CAT. CODE   | 43. FEDERAL TAX DATA                | 44. STATE TAX DATA       |  |                                |                   |                   |                 |
| CODE 0-NO PREVIOUS SERVICE<br>1-NO BREAK IN SERVICE<br>2-BREAK IN SERVICE (LESS THAN 3 YEARS)<br>3-BREAK IN SERVICE (MORE THAN 3 YEARS) |                       | FORM EXECUTED 1-YES<br>2-NO         | CODE NO. TAX EXEMPTIONS  | FORM EXECUTED 1-YES<br>2-NO                              | CODE NO. TAX EXEMP. STATE CODE |                   |                   |                 |
| 45. POSITION CONTROL CERTIFICATION  |                       |                                     |                          | 46. O.P. APPROVAL  |                                |                   |                   |                 |
|   |                       |                                     |                          | DATE APPROVED  |                                |                   |                   |                 |

SECRET

EMPLOYEE NOTICE OF RESIGNATION

I RESIGN EFFECTIVE \_\_\_\_\_ FOR THE FOLLOWING REASON:  
(Date)

MY LAST WORKING DAY WILL BE—

DATE SIGNED

SIGNATURE OF EMPLOYEE

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, State, Zip Code)

INSTRUCTIONS

Items 1 thru 7  
and  
Items 9 thru 18a)

The initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains *only* to the action requested, nor NOT to the current status of the employee unless specific items remain unchanged.

Item 5 — "Category of Employment" should show one of the following entries:

|                     |            |            |
|---------------------|------------|------------|
| Regular             | Summer     | WAE        |
| Part Time           | Detail Out | Consultant |
| Temporary           | Detail In  | Military   |
| Temporary-Part Time |            |            |

Item 9 — "Organizational Designations" should show *all* levels of organization pertinent to identifying the location of the position:

FIRST LINE  
Major Component (*Director, Deputy Director, etc.*)  
Office, Major Staff, etc.  
Foreign Field or U.S. Field (*if pertinent*)  
Division or Staff (*subordinate to first line*)  
Branch  
Section  
Unit

Items 11 and 15 — "Position Title" and "Occupational Series" should be the standard abbreviated title and corresponding occupational series in Handbook of Official Occupational Titles and Codes for the duties actually to be performed by the employee. If different from the title and series of the position occupied as shown on the most current edition of the Position Control Register or Form 261, Staffing Complement Change Authorization, explain under Item 18—Remarks.

Item 18b — Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, *the gaining Career Service should approve* and the other Career Service should concur in Item 18, Remarks.

ROUTING—The original only of this form will be forwarded to the Office of Personnel through the appropriate Career Service official(s). In the case of requests specified in \_\_\_\_\_ which require advance approval of or notification to the Office of Security or the Office of Finance, one copy only will be sent to the Office(s) concerned.

SECRET

UNCLASSIFIED

INTERNAL

CONFIDENTIAL

SECRET

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# ROUTING AND RECORD SHEET

SUBJECT: (Optional)

STATINTL

FROM:

OSI

EXTENSION

NO.

DATE

STAT

(Officer designation, room number, and building)

DATE

RECEIVED

FORWARDED

OFFICER'S INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

1. DDS&T Admin.  
6E46 Hq.

30 MAY 1974

R

~~For approval.~~

2. Dr. Tustjens  
10 - 4061

31 MAY 1974

*[Signature]*

3. DDM&S  
7C18 Hq.

For concurrence.

4. DDS&T Admin  
6E46 Hq.

For approval.

5.

6. OP/PI  
5E13 Hq.

2. - Per our telephone conversation, please let me know if this cover serves conversion is OK.

7.

8.

9.

10.

11.

12.

13.

14.

15.

STATINTL

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